

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MA</i>	<i>70591</i>	<i>1/31</i>
O.I.P.E. CLASSIFIER		<i>21</i>	<i>2/14/00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>69300</i>	

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	Original
1	✓ 1/27/01
2	✓ 1/27/01
3	✓ 1/27/01
4	✓ 1/27/01
5	✓ 1/27/01
6	✓ 1/27/01
7	✓ 1/27/01
8	✓ 1/27/01
9	✓ 1/27/01
10	✓ 1/27/01
11	✓ 1/27/01
12	✓ 1/27/01
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14	✓ 1/27/01
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38	✓ 1/27/01
39	✓ 1/27/01
40	✓ 1/27/01
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44	✓ 1/27/01
45	✓ 1/27/01
46	✓ 1/27/01
47	✓ 1/27/01
48	✓ 1/27/01
49	✓ 1/27/01
50	✓ 1/27/01

Claim	Date
Final	Original
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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